

Investment Direction Form

Legislators' Retirement System

State Form 50891 (R1/ 01-2002)

PRIVACY NOTICE

All Social Security Numbers are requested by this agency in accordance with the requirements of the Internal Revenue Code. Disclosure is mandatory; this form will not be processed without this information.

Member's Name: First, Middle, (Maiden), Last		Member's Social Security Number	
Member's Address: Street		City	State ZIP

You have the right to change your investment direction at any time while you maintain a balance in your Legislator's Defined Contribution Plan. However, your change will not take effect until the first day of the next calendar quarter: January 1, April 1, July 1, or October 1. This form must be received at least thirty (30) days prior to the date it is to take effect. If you no longer serve in the General Assembly, and leave your money with the Plan, you still retain the right to direct the investment of your account.

This form revokes and replaces all previously selected investment directions. You must list all of your investment directions and the percentages must total 100%, or it will be returned. Investments may only be made in increments of 10%. This form must be correctly completed and signed in order to take effect.

Your investment options can only be changed by filing this form with PERF at the following address:

Public Employees' Retirement Fund
143 West Market Street
Indianapolis, IN 46204

If you have not received a confirmation notice within 3 weeks of mailing this form, please call the Fund at 317-233-4146.

	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
Consolidated Retirement Investment Fund	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Money Market Fund	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bond Fund	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S&P 500 Index Fund	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
US Small Companies Stock Fund	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
International Equity Index Fund	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The total of all selections must equal 100%

I revoke any previous investment directions and hereby direct the above investments, effective this date.

Member's Signature

Date